

# CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1													
2		/					51						
3		/					52						
4							53						
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45							94						
46							95						
47							96						
48							97						
49							98						
50							99						
Total Indep							100						
Total Depend							Total Indep						
Total Claims							Total Depend						
							Total Claims						